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FAX COVER SHEET

		<u> </u>	<u> </u>
Date:	December 22, 2004	Phone Number	Fax Number
To:	Examiner Brian Albertalli		(703) 872-9306
From:	Kevin J. Zilka		
Docket N	o.: BVOCP022A	App. No:	10/005,597
Total Nu	mber of Pages Being Transmitted, Including	Cover Sheet: 14	
Messag	e;		
Please	deliver to Examiner Albertalli.		
Thank	7- 19 01,		
Kevin	J. Zilka		
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ANY OTHER DIFFICULTY, PLEASE PHONE ______ Erica
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

- 21 2011

SPEECH RECOGNITION FOR

GRAMMAR (as amended)

RECOGNIZING ADDRESSES WITH

PATENT

DEC 2 2 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

) Group Art Unit: 2655) Examiner: Albertalli, Brian L.) Date: December 22, 2004 CERTIFICATE OF FACSIMILE I hereby certify that this correspondence is being facsimile transmitted to the or of Patents at facsimilary imber: (103) 872-9306 on the above date.

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

For:

In re the application of:

Filed: 11/07/2001

Levitt et al.

Application No. 10/005,597

Dec 22 04 11:25a

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present <u>Extra</u>	SMALL ENT RATE FEE	ITY _.	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS			_ 01	X25 = \$	OR	X50 =	\$ 50
INDEP CLAIMS		06	_ 00	X100 = \$	OR	X200 =	\$
[] Multiple Dependent Claim Present				\$0			\$0
and Fee Not Previously Paid		TOTAL	\$			\$ <u>50.00</u>	

Applicant(s) hereby petition for a One Month extension of time to respond to the outstanding Office Action. Applicant(s) believe that no additional Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.

Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. BVOCP022A). A copy of this sheet is enclosed for billing purposes

> Respectfully submitted, Zilka-Kotab, PC

Kevin J. Zilka

Registration No. 41,429

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised 1736)

408 971 4660

p.3

DEC 2 2 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

	In re th	e application o	f:		,) 	T.L.:10. 26			
		Levitt et al.) Group Art Unit: 2655)		33		
	Application No. 10/005,597)) Examiner: Albertalli, Brian L.						
		ed: 11/07/2001		SSES WITH						
	For:) Date: December 22, 2004)				
			,45		l hereby of Commission	Tity that this of of patents at t	iricate of i	s is being	facsimil	te transmitted to the on the above date.
P.O. Bo	x 1450	for Patents . 22313-1450	•							
Sir:										
τ	ransmit	ted herewith is a	ın amendment	in the abov	e-identif	ied applicati	on.			
Т	he fee h	as been calculat	ed as shown b	elow.						
		Claims								
		Remaining After Amendment	Highest Previously Paid For	Present Extra		SMALL ENT RATE FEE	ITY	OR		GE ENTITY E FEE
TOTAL CLAIMS INDEP				01		X25 = \$	OR	X50 =	\$ 50	
CLAIMS	S	_04	06	00	. :	X100 = \$	OR	X200 =	\$	
[] Multiple Dependent Claim Present and Fee Not Previously Paid				:	60			\$0		
andro		Teviousiy I alu		TOTAL		\$			\$ <u>50.00</u>	
<u> </u>	Applicant(s) hereby petition for a <u>One Month</u> extension of time to respond to the outstanding Office Action. Applicant(s) believe that no additional Extension of Time is required; however, if it is determined that such a extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account								ned that such an orize the	
	3	No. 50-1351. Enclosed is our Check No. in the amount of \(\frac{1}{2}\) to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. \(\frac{50-1351}{2} \) (Order No. BVOCP022A). A copy of this sheet is enclosed for billing purposed.								
	Respectfully submitted, Zilka-Kotab, PC									
				i i	Kevin J.	Zilka	129			

(Revised 17%)

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573 Dec 22 04 11:26a

DEC 2 2 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Levitt et al.

Application No. 10/005,597

Filed: 11/07/2001

For: SPEECH RECOGNITION FOR RECOGNIZING ADDRESSES WITH GRAMMAR (as amended)

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner of Patents at facsimily number: (703) 872-9309 on the above date.

Erica L. Farlow

Signed:

AMENDMENT A

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313

Dear Sir:

In response to the office action mailed 9/20/2004, please enter the following amendments and remarks to the above mentioned patent application.